

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

America's Opportunity Fund

ADDRESS (number and street)

c/o Contribution Solutions, LLC

123 E. San Carlos St., #531

☐ Check if different than previously reported. (ACC)

San Jose

CA

95112

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00573790

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☒ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

07

01

2015

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

12

31

2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Vida Benavides

Signature of Treasurer

Vida Benavides

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

01

31

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

America's Opportunity Fund

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 07 01 2015

To:

 M M / D D / Y Y Y Y Y  
 12 31 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	12285.44	
(c) Total Receipts (from Line 19) .....	11416.00	31602.79
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	23701.44	31602.79
7. Total Disbursements (from Line 31) .....	11726.54	19627.89
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	11974.90	11974.90
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

America's Opportunity Fund

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 07 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y  
 12 / 31 / 2015
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

3662.00

20013.79

(ii) Unitemized .....

2654.00

3989.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

6316.00

24002.79

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

6316.00

24502.79

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

5100.00

7100.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

11416.00

31602.79

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

11416.00

31602.79

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	11476.54	19377.89
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	11476.54	19377.89
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	250.00	250.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	11726.54	19627.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11726.54	19627.89

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	6316.00	24502.79
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6316.00	24502.79
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	11476.54	19377.89
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	11476.54	19377.89

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**America's Opportunity Fund**

Full Name (Last, First, Middle Initial)

## **A. Rosemary Abriam**

Mailing Address 20 Maryland Ave Unit 301

City State Zip Code  
 Rockville MD 20850-0359

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Center for Asian Pacific American Wome

Occupation  
 President/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 16 / 2015

**Transaction ID : C10622826**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. Meina Banh**

Mailing Address 1215 I St SE

City State Zip Code  
 Washington DC 20003-4109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Consumer Financial Protection Bureau

Occupation  
 Policy Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2015

**Transaction ID : C10619410**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. David Castagnetti**

Mailing Address 5607 Albia Rd

City State Zip Code  
 Bethesda MD 20816-3304

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Mehlman Castagnetti Rosen Bingel Thoma

Occupation  
 Lobbyist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2015

**Transaction ID : C10589196**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 23

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

America's Opportunity Fund

Full Name (Last, First, Middle Initial)

**A. Chris Chan**

Mailing Address 1314 Massachusetts Ave NW #506

City  
WashingtonState  
DCZip Code  
20005-4163FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			12			2015			

Transaction ID : C10622021

Amount of Each Receipt this Period

212.00

\* In-Kind: Event Catering

Full Name (Last, First, Middle Initial)

**B. Michael Fox**

Mailing Address 14751 Quito Rd

City  
SaratogaState  
CAZip Code  
95070-6291FEC ID number of contributing  
federal political committee.

C

Name of Employer

ME Fox &amp; Co Inc

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3850.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			12			2015			

Transaction ID : C10620416

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Les Jin**

Mailing Address 3001 Veazey Ter NW #330

City  
WashingtonState  
DCZip Code  
20008-5455FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2015			

Transaction ID : C10621466

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

412.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**America's Opportunity Fund**

Full Name (Last, First, Middle Initial)

## **A. Kevin Kim**

Mailing Address 60 Riverside Blvd  
Apt 307

City State Zip Code  
New York NY 10069-0203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tactile Brain LLC

Occupation

Education

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 13 / 2015

**Transaction ID : C10620435**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. Ginger Lew**

Mailing Address 6049 Ashford Lane, Unit 204

City State Zip Code  
Naples FL 34110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 29 / 2015

**Transaction ID : C10621083**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. Genie Giao Nguyen**

Mailing Address 6082 Occoquan Forest Dr

City State Zip Code  
Manassas VA 20112-3070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Samson Properties

Occupation

Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

**Transaction ID : C10584538**

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

900.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**America's Opportunity Fund**

Full Name (Last, First, Middle Initial)

**A. Genie Giao Nguyen**

Mailing Address 6082 Occoquan Forest Dr

City State Zip Code  
 Manassas VA 20112-3070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Samson Properties

Occupation

Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 13 / 2015

Transaction ID : C10620425

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Jadine Nielsen**

Mailing Address 1 Keahole Pl  
 Apt 3611

City State Zip Code  
 Honolulu HI 96825-3425

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 27 / 2015

Transaction ID : C10616608

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Monica Thammarath**

Mailing Address 1201 16th Street, NW  
 Suite 410

City State Zip Code  
 Washington DC 20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

National Education Association

Occupation

Senior Liaison

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 12 / 2015

Transaction ID : C10622825

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**America's Opportunity Fund**

Full Name (Last, First, Middle Initial)

**A. Alvina Yeh**

Mailing Address 907 Quincy St NW

Apt 4

City

Washington

State

DC

Zip Code

20011-5700

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Voices

Occupation

Dep Dir Capacity Building

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 04 / 2015

Transaction ID : C10617622

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Chris Chan**

Mailing Address 1314 Massachusetts Ave NW #506

City

Washington

State

DC

Zip Code

20005-4163

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

11 / 16 / 2015

Transaction ID : C10622828A

Amount of Each Receipt this Period

250.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address P.O. Box 441146

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

11 / 22 / 2015

Transaction ID : C10622828AB

Amount of Each Receipt this Period

250.00

**[MEMO ITEM]**

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 23

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

America's Opportunity Fund

Full Name (Last, First, Middle Initial)

A. Patricia Loui

Mailing Address 2241 Nuna St

City

Honolulu

State

HI

Zip Code

96821

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Not employed

Occupation

Not employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	1	5

Transaction ID : C10622827A

Amount of Each Receipt this Period

250.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

B. ActBlue

Mailing Address P.O. Box 441146

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	1	5

Transaction ID : C10622827AB

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

3662.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 23  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

**America's Opportunity Fund**

Full Name (Last, First, Middle Initial)

**A. IBEW PAC Educational Fund**

Mailing Address 900 Seventh Street, NW

City  
WashingtonState Zip Code  
DC 20001FEC ID number of contributing  
federal political committee.

C C00027342

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	05	/	2015

Transaction ID : C10621465

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00

5000.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**America's Opportunity Fund**

Full Name (Last, First, Middle Initial)

**A. Contribution Solutions, LLC**

Mailing Address 123 E. San Carlos St., #531

City San Jose      State CA      Zip Code 95112

Purpose of Disbursement  
Bookkeeping and Reporting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 08 / 2015
**Transaction ID : D529258**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Contribution Solutions, LLC**

Mailing Address 123 E. San Carlos St., #531

City San Jose      State CA      Zip Code 95112

Purpose of Disbursement  
Bookkeeping and Reporting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 21 / 2015
**Transaction ID : D532299**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Contribution Solutions, LLC**

Mailing Address 123 E. San Carlos St., #531

City San Jose      State CA      Zip Code 95112

Purpose of Disbursement  
Bookkeeping and Reporting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 14 / 2015
**Transaction ID : D531451**

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**America's Opportunity Fund**

Full Name (Last, First, Middle Initial)

**A. Netrist Solutions LLC**

Mailing Address PO Box 687

City Charleston      State SC      Zip Code 29402

Purpose of Disbursement  
Website Maintenance

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 02 / 2015
**Transaction ID : D529781**

Amount of Each Disbursement this Period

450.00

Full Name (Last, First, Middle Initial)

**B. NGP VAN, Inc.**Mailing Address 1101 15th St NW  
Ste 500

City Washington      State DC      Zip Code 20005-5006

Purpose of Disbursement  
Database Software

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 09 / 2015
**Transaction ID : D530548**

Amount of Each Disbursement this Period

1434.00

Full Name (Last, First, Middle Initial)

**C. NGP VAN, Inc.**Mailing Address 1101 15th St NW  
Ste 500

City Washington      State DC      Zip Code 20005-5006

Purpose of Disbursement  
Database Software

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 31 / 2015
**Transaction ID : D529176**

Amount of Each Disbursement this Period

1434.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3318.00







<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

America's Opportunity Fund

### A. Sage Payment Solutions

Age Group	Percentage
18-24	16.60
25-34	16.60
35-44	16.60
45-54	16.60
55-64	16.60
65-74	16.60
75-84	16.60
85+	16.60

State:  District:

Full Name (Last, First, Middle Initial)

### B. Arum Group LLC

07 / 23 / 2015

Candidate Name

2160.76

State:  District:

Full Name (Last, First, Middle Initial)

### C. Airbnb

Candidate Name

370.00

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2177.36

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**America's Opportunity Fund**

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 233 S. Wacker Drive

City Chicago   State IL   Zip Code 60606

Purpose of Disbursement  
Air Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:   District:

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 25 / 2015
**Transaction ID : D528340**

Amount of Each Disbursement this Period

1396.20

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Wild Ginger**

Mailing Address 1401 3rd Ave.

City Seattle   State WA   Zip Code 98101

Purpose of Disbursement  
Event Catering

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:   District:

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 29 / 2015
**Transaction ID : D528341**

Amount of Each Disbursement this Period

394.56

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Arum Group LLC**Mailing Address 625 3rd St NE  
Apt 2

City Washington   State DC   Zip Code 20002-4942

Purpose of Disbursement  
Reimbursement - event catering and postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:   District:

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 23 / 2015
**Transaction ID : D528342**

Amount of Each Disbursement this Period

174.60

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.60

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**America's Opportunity Fund**

Full Name (Last, First, Middle Initial)

**A. Arum Group LLC**Mailing Address 625 3rd St NE  
Apt 2

City Washington State DC Zip Code 20002-4942

Purpose of Disbursement  
Reimbursement - Event Catering

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
09 / 14 / 2015**Transaction ID : D529320**

Amount of Each Disbursement this Period

390.91

Full Name (Last, First, Middle Initial)

**B. Arum Group LLC**Mailing Address 625 3rd St NE  
Apt 2

City Washington State DC Zip Code 20002-4942

Purpose of Disbursement  
See Below

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 23 / 2015**Transaction ID : D531600**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. RFD Washington**

Mailing Address 810 7th Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Event Catering

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 12 / 2015**Transaction ID : D531601**

Amount of Each Disbursement this Period

250.00

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

640.91

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

America's Opportunity Fund

Full Name (Last, First, Middle Initial)

**A. Arum Group LLC**Mailing Address 625 3rd St NE  
Apt 2

City Washington State DC Zip Code 20002-4942

Purpose of Disbursement  
Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 21 2015

Transaction ID : D532297

Amount of Each Disbursement this Period

49.00

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

49.00

11452.83

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

America's Opportunity Fund

Full Name (Last, First, Middle Initial)

**A. Arum Group LLC**Mailing Address 625 3rd St NE  
Apt 2

City Washington State DC Zip Code 20002-4942

Purpose of Disbursement  
See Below

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		23		2015

Transaction ID : D531602

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**B. RFD Washington**

Mailing Address 810 7th Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Event Catering

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		12		2015

Transaction ID : D531603

Amount of Each Disbursement this Period

250.00
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

250.00
--------

250.00
--------

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 23 OF 23

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

America's Opportunity Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Arum Group LLC

Nature of Debt (Purpose):

Lodging, air travel and event catering  
reimbursementMailing Address 625 3rd St NE  
Apt 2City State Zip Code  
Washington DC 20002-4942

Outstanding Balance Beginning This Period

2160.76

Transaction ID : D528122

Amount Incurred This Period

0.00

Payment This Period

2160.76

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►